

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 09/831820 FILING DATE 05 JUN 2001

APPLICANT(S)

Giuseppe

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		* IND.	* DEP.	* IND.	* DEP.	* IND.	* DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
1	/						51					
2	/						52					
3	2						53					
4	0						54					
5	0						55					
6	0						56					
7	0						57					
8	0						58					
9	0						59					
10	0						60					
11	0						61					
12	0						62					
13	0						63					
14	0						64					
15	0						65					
16	0						66					
17	0						67					
18	/						68					
19							69					
20							70					
21							71					
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42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
TOTAL IND.	3						TOTAL IND.					
TOTAL DEP.	16	↔		↔		↔	TOTAL DEP.		↔		↔	↔
TOTAL CLAIMS	19	████████		████████		████████	TOTAL CLAIMS	████████		████████		████████